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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Eisen, Joshua, , Dr., (b) Address (number and street)	Charlett address sharperd						
	182 UNION AVE	☐ Check if address changed				Candidate's FEC Identification Number S4NY00362		
	(c) City, State, and ZIP Code			, 405	20	3. Is This New		
	HARRISON		N	1052		Statement X (N)	OR (A)	
4.	Party Affiliation REPUBLICAN PARTY	5. Office Soug Senate	ht		6. State & Dist	rict of Candidate 00		
	REI OBLICANT ARTI	Ochaic			1 111			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
	Eisen For NY							
	(b) Address (number and street)							
	182 Union Avenue							
	(c) City, State, and ZIP Code							
	Harrison				NY	10528		
	D.F.		N OF OT		TUODIZED	00111117777		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)								
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my								
candidacy.								
NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)								
(I-) Address (see she she she she								
(b) Address (number and street)								
(c) City, State, and ZIP Code								
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.								
Signature of Candidate					Date			
E	Eisen, Joshua, , Dr.,					10/04/2023		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								

FEC FORM 2 (REV. 02/2009)